	UTILITY	Attorney Docket No. 216109US2X							
	PATENT APPLICATION	First Inventor or Application Identifier Shinji KONDO							
(Only	TRANSMITTAL approvisional applications under 37 CFR 1 53(b))	Title PULSE WAVE MEASURING APPARATUS AND PULSE WAVE MEASURING METHOD							
12/0	131	Assignee Name: KABU:	SHIKI GAISYA K	(-AND-S and KYOF	O MACHINE WOR	KS,			
6	U. S	LTD.							
	סי	Assignee Address: 93-3, Nakamaeda, Igaya-cho, Kariya-shi, Aichi-ken, 448-000 JAPAN and 6 Toyota-cho, Toyota-city, Aichi-pref., 471-8515							
_	3					, Z			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents			ADDRESS TO:	Assistant Comm Box Patent Appli Washington, DC	issioner for Patents ication 20231	0/00			
1.	Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)		ACCO	OMPANYING APPI	LICATION PARTS	Ja			
2. ■ Specification Total Sheets		Sheets 30			r sheet & document	.(s)) (3)			
۷.	Specification Total	Sileets30		ation Data Sheet. S .R. §3.73(b) Statem ere is an assignee)		Attorney			
3.	■ Drawing(s) Formal Total	Sheets 15	1	ere <i>is an assign</i> ee) n Translation Docur		racino			
	3.,		_	ation Disclosure ent (IDS)/PTO-144		f IDS			
4.	■ Oath or Declaration Total	Pages 4		nary Amendment	o Citations	( <i>-)</i>			
	a.  Newly executed (original or cop	13. White Advance Serial No. Postcard							
	b.   Copy from a prior application (3 (for continuation / divisional w/ box	14. □ Certified Copy of Priority Document(s) ()							
	i. DELETION OF INVENTO Signed statement attached delet the prior application, see 37 C.F. 1.33(b).	R(S) ing inventor(s) named in .R. §1.63(d)(2) and		ant claims small ent CFR 1 27					
	CD-ROM or CD-R in duplicate, large	e table or Computer	16. ■ Other:	Statement of Re	elevancy				
6.	□ Nucleotide and/or Amino Acid Sequ (if applicable, all necessary)			Claid Hell of Ne					
2	a. □ Computer Readable Form (CRI	F)							
	b. Specification or Sequence Listing of	n:							
N D	i.   CD-ROM or CD-R (2 copi	es); or							
ā	ii. 🛘 Paper								
9	c.   Statements verifying identity of								
17.	If a CONTINUING APPLICATION, check								
	☐ Continuation ☐ Divisional	□ Continuation-	in-part (CIP)	of prior applicatio					
	Prior application Information: Examin		or application from	Group Ar		v 4h ie			
wher	CONTINUATION OR DIVISIONAL APPS only: The idered a part of the accompanying continuation or or a portion has been inadvertently omitted from the	entire disclosure of the pric livisional application and is submitted application parts	hereby incorporated	by reference. The inco	poration <u>can only</u> be re	lied upon			
	Amend the specification by inserting bef								
	□ This application is a □ Continuation □ Division □ Continuation-in-part (CIP) of application Serial No. Filed on								
□ Which was published in English									
	Which was not published in English								
	This application claims priority of provis	ional application Seria	al No.	F	iled				
		19. CORRESPOND	ENCE ADDRES	s					
		228	50						
(703) 413-3000 FACSIMILE: (703) 413-2220									
I	Name: Norman Fr. Oblon			Registration No.:	24,618	$\neg \overline{1}$			
	M/M/		<del></del>	. togiodadon 140	4 /	$\neg$			
	Signatura:			Datas	12/6/01	- 1			

29,099

Registration No.:

Name: Robert T. Pous

Docket No.

216109US2X

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Shinji KONDO ET AL
SERIAL NO: New Application

FILING DATE: Herewith

FOR: PULSE WAVE MEASURING APPARATUS AND PULSE...

## FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS		
TOTAL CLAIMS	36 - 20 =	16	× \$18 =	\$288.00		
INDEPENDENT CLAIMS	4 - 3 =	1	× \$84 =	\$84.00		
□ MULTIPLE DEPENDE	MULTIPLE DEPENDENT CLAIMS (If applicable) + \$280 =					
☐ LATE FILING OF DEC	LATE FILING OF DECLARATION + \$130 =					
	\$740.00					
	\$1,112.00					
□ REDUCTION BY 50% I	\$0.00					
<ul> <li>FILING IN NON-ENGL</li> </ul>	+ \$130 =	\$0.00				
■ RECORDATION OF AS	+ \$40 =	\$40.00				
	\$1,152.00					

Please charge Deposit Account No. 15-0030 in the amount of

A duplicate copy of this sheet is enclosed.

A check in the amount of \$1,152.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. <u>15-0030</u>. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND, MAIER & NEUSTADT, P.C.

Date:



22850 Tel. (703) 413-3000 Fax. (703) 413-2220 (OSMMN 10/00)

Norman F. Oblon

Registration No. 24,618

Robert T. Pous

Registration No.

29,099